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To: Mail Stop AMENDMENT From: Mikio Ishimaru
Examiner Hoang V. Nguyen

Fax: (571) 273-8300 Pages: 8, including this page
TC 2821 - Before Final

Phone: 571-272-1825 Date: July 25, 2005

Re: U.S. Patent Application Serial
No. 10/791,888 Atty Docket no.: 21-021

☒ Response/Amendment to Office Action ☐ Information ☐ Other

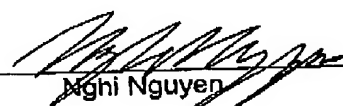
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Nghi Nguyen

With reference to serial number 10/791,888, the following are being submitted:

- Fax Cover Sheet with Certificate of Transmission (1 page)
- Transmittal for Enclosures (1 page)
- Amendment (6 pages)

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JUL 25 2005

PATENT

Docket No.: 21-021

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Gérard Terreault et al.

: Confirmation No.: 4814

Serial No.: 10/791,888

: Examiner: Hoang V. Nguyen

Filed: 3/4/2004

: Group Art Unit: 2821

For: SIGNAL LEAKAGE DETECTOR

TRANSMITTAL FOR ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Response / Amendment	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> After Final	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Affidavits/Declaration(s)	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Information Disclosure Statement, PTO Form-1449, & cited Reference(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	• Fax Cover Sheet with Certificate of Transmission
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

The fee, if required, has been calculated as shown below:

	NO. OF CLAIMS	HIGHEST PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	FEE
Total Claims	20	21	0	x \$25 =	\$ 0.00
Independent Claims	3	3	0	x \$100 =	\$ 0.00
If multiple claims newly presented, add \$150					
Fee for extension of time					
Other:					
TOTAL FEE					\$0.00

- ☐ Please charge Deposit Account No. 50-0374 in the amount of \$ 0.00. An additional copy of this transmittal sheet is submitted herewith.
- ☒ The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment, to Deposit Account No. 50-0374, including any filing fees under 37 CFR 1.16 for presentation of extra claims and any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,



Mikio Ishimaru
Registration No. 27,449
Date: July 25, 2005

Docket No.: 21-021

RECEIVED
CENTRAL FAX CENTER**PATENT****JUL 25 2005****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

<i>In re</i> Application of:	Gérard Terreault, et al.	:	Confirmation No.:	4814
Serial No.:	10/791,888	:	Art Unit:	2821
Filed:	3/4/2004	:	Examiner:	Hoang V. Nguyen
For:	SIGNAL LEAKAGE DETECTOR	:		

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir/Madam:

The following Amendment and Remarks are submitted under 37 C.F.R. §1.111 in response to the Office Action mailed April 25, 2005, following the amendment format set forth under 37 CFR §1.121. After this introductory section, there are Amendments to the Claims and then Remarks, each starting on a separate page.

Amendments to the Claims consist of deletion of claim 14 and an amendment of claim 13, which are incorporated in a complete listing of the claims.